# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P14000057873

Entity Name: 24/7 TAXI CABS, INC

#### **Current Principal Place of Business:**

2770 WILD PINES NAPLES, FL 34112

## **Current Mailing Address:**

P.O. BOX 9206 NAPLES, FL 34101 UN

## FEI Number: 47-1278826

## Name and Address of Current Registered Agent:

GASTON, FIGARO MR 2770 WILD PINES LANE 1021 NAPLES, FL 34112 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

## SIGNATURE: GASTONFIGARO

Electronic Signature of Registered Agent

## Officer/Director Detail :

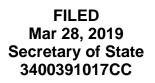
TitlePNameGASTON, FIGARO F MRAddress2770 WILD PINES<br/>UNITE 1021City-State-Zip:NAPLES FL 34112

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

OWNER

SIGNATURE: FIGARO GASTON

Electronic Signature of Signing Officer/Director Detail



Certificate of Status Desired: No

03/28/2019 Date

03/28/2019 Date